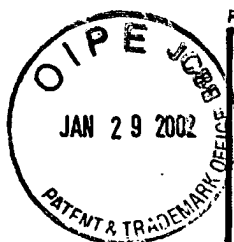


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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing	Attorney Docket Number	700706.90076
	First Named Inventor	Roland Green
	COMPLETE IF KNOWN	
	Application Number	09/994,145
	Filing Date	11/26/2001
	Group Art Unit	1645
Examiner Name		

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As a below named inventor, I hereby declare that:
My residence, post office address and citizenship are as stated below next to my name.
I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MICROARRAYS WITH VISIBLE PATTERN DETECTION

the specification of which *(Title of the invention)*

☒ is attached hereto
OR
☐ was filed on (MM/DD/YYYY) _____ as United States Application Number or PCT International
Application Number _____ and was amended on (MM/DD/YYYY) _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.
I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §366(b) of any foreign application(s) for patent or inventor's certificate or §366(e) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign applications numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §118(a) of any United States provisional application(s) listed below.

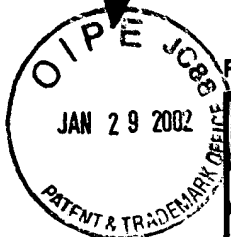
Application Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231. QBMAD\319142

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DECLARATION				Page 2
I hereby claim benefits under Title 35, United States Code § 120 of any United States application(s), or § 365(C) of any PCT International application designating the United States of America, filed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application or PCT International application in the manner provided in the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.				
U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)	
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto				
As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and all continuation and divisional applications based thereon, and to transact all business in the Patent and Trademark Office connected therewith:				
<input type="checkbox"/> Firm Name Customer or label Number 				
<input checked="" type="checkbox"/> List attorney(s) and/or agent(s) name and registration number below				
Name	Registration Number	Name	Registration Number	
Herbert W. Mylius	24,578	Bennett J. Berson	37,094	
Barry E. Sammons	25,608	Michael A. Jaskolski	37,551	
Charles W. Jirauch	26,186	Richard T. Roche	38,589	
Nicholas J. Seay	27,386	Terri S. Flynn	41,756	
George E. Haas	27,642	John T. Pienkos	42,997	
Michael J. McGovern	28,326	Daniel G. Radler	43,028	
Carl R. Schwartz	29,437	Gregory M. Smith	43,136	
Keith M. Baxter	31,233	Steven J. Wietrzny	44,402	
John D. Franzini	31,356	Paul D. Amrozowicz	45,284	
Janine R. Novatt	32,583	David M. Kettner	45,598	
Jean C. Baker	35,433	Adam J. Forman	46,707	
David G. Ryser	36,407	Zhibin Ren	47,897	
<input type="checkbox"/> Additional attorney(s) and/or agents named on a supplemental priority sheet attached hereto				
Please direct all correspondence to <input type="checkbox"/> Customer Number or label OR <input checked="" type="checkbox"/> Fill in correspondence address below				
Name	Nicholas J. Seay			
Address	Quarles & Brady LLP			
Address	P O Box 2113			
City	Madison	State	WI	Zip 53701-2113
Country	USA	Telephone	(608)251-5000	Fax (608)251-9166
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.				
Name of Sole or First Inventor:		A petition has been filed for this unsigned inventor		
Given	Roland	Middle		Family
				Green
Inventor's Signature				Date
Residence:	Madison	State	WI	Country US
Citizenship	US			
Post Office	2017 Frazer Road			
Post Office				
City	Madison	State	WI	Zip 53713
		Country	US	
Applicant Authority				
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto				



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DECLARATION										ADDITIONAL INVENTOR(S) Supplemental Sheet		
Name of Additional Joint Inventor, if any:										A petition has been filed for this unsigned inventor		
Given	Thomas			Middle		Family	Albert			Suffix		
Inventor's									Date	1/08/01		
Residence:	Madison				State	WI	Country	US		Citizenship	US	
Post Office	3554 Heather Crest											
Post Office												
City	Madison			State	WI	Zip	53705		Country	US		
											Applicant Authority	
Name of Additional Joint Inventor, if any:										A petition has been filed for this unsigned inventor		
Given	Emile			Middle Initial		Family Name	Nuwaysir			Suffix		
Inventor's									Date	1/08/01		
Residence:	Madison				State	WI	Country	US		Citizenship	US	
Post Office	2022 Madison Street											
Post Office												
City	Madison			State	WI	Zip	53711		Country	US		
											Applicant Authority	
Name of Additional Joint Inventor, if any:										A petition has been filed for this unsigned inventor		
Given				Middle		Family				Suffix		
Inventor's									Date			
Residence:					State		Country			Citizenship		
Post Office												
Post Office												
City				State		Zip			Country			
											Applicant Authority	
Name of Additional Joint Inventor, if any:										A petition has been filed for this unsigned inventor		
Given				Middle		Family				Suffix		
Inventor's									Date			
Residence:					State		Country			Citizenship		
Post Office												
Post Office												
City				State		Zip			Country			
											Applicant Authority	

Additional inventors are being named on supplemental sheet(s) attached hereto

** TOTAL PAGE 04 **